FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1		(See instruction	_	O	fice use only
NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
SHEET METAL	. WORKERS INT'I	PAL LCL 137		<u> </u>	
1					
ADDRESS (number and	21-42	44TH DRIVE			
(Check if address is changed)		S ISLAND CITY		NY L	11101 _ 4710
			CITY	STATE	ZIP CODE 📥
RICHARD@LO					
<u> </u>			1 1 1 1 1 1 1 1 1 1		
COMMITTEE'S WEB	PAGE ADDRESS (UI	RL)			·
	11111	1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1	
		1 1 1 1 1 1			
COMMITTEE'S FAX N 7189374113 L L L L L L 2. DATE M N 0 7					
3. FEC IDENTIFICA	TION NUMBER		C C00373050	1	
4. IS THIS STATEM	ENT NEW	(N) OR	X AMENDED (A)	_	
I certify that I have exami	ned this Statement and	to the best of my kno	wledge and belief it is true, correct a	nd complete	
Type or Print Name of	Treasurer	ICHARD QUAR	ESIMA		
Signature of Treasurer	Electronically Filed	by RICHARD	QUARESIMA	Date 07	19 / Y Y Y Y Y Y Y
NOTE: Submission of fall			v subject the person signing this Stat	·	of 2 U.S.C. S437g.
Office Use Only			For further information Federal Election Commis Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2003)

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5.	TYPE OF COMMITTEE (Check One)	
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the c information below.)	andidate
	Name of Candidate _ _ _ _ _ _ _ _	
	Candidate Party Affiliation Office Sought: House Senate President	State District
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	
	(d) This committee is a (or subordinate) committee of the	emocratic, publican,etc.) Party.
	 (e) This committee is a separate segregated fund (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund 	nd or party
ô.	Name of Any Connected Organization or Affiliated Committee	
L	SHEET METAL WORKERS INT'L PAL LCL 137	
L		
	Mailing Address 21-42 44TH DRIVE	
	LONG ISLAND CITY NY 11	101 _ 4710 _
	CITY▲ STATE▲	ZIP CODE 🛦
	Relationship CONNECTED	
	Type of Connected Organization:	
	Corporation Corporation w/o Capital Stock X Labor Organization	on
	Membership Organization Trade Association Cooperative	

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Write or Type Committee Name			
SHEET METAL WORKE	RS INT'L PAL LCL 137		
 Custodian of Records: Ide possession of Committee 	ntify by name, address, (phone number books and records.	er optional), and position of t	he person in
Full Name PAUL C	COLLINS, Jr.		
Mailing Address	21-42 44th DRIVE		
	LONG ISLAND CITY	NY	11101
Title or Position ▼	CITY A	STATE▲	ZIP CODE A
PRESIDEN	т	718 Telephone number	937
Full Name of Treasurer Mailing Address	RD QUARESIMA 21-42 44TH DRIVE		
	LONG ISLAND CITY	NY	11101 _ 4710
Title or Position ♥	CITY A	STATE▲	ZIP CODE A
SECRETAR	RY-TREASURER	Telephone number 718	937 4514
Full Name of Designated Agent			
Mailing Address			
Title or Position ♥	CITY A	STATE A	ZIP CODE A
		Telephone number	

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9.	Banks or Other Depositories safety deposit boxes or maintain Name of Bank, Depository, etc.	ns funds.	ts, rents
	CHASE	E MANHATTAN BANK	
	Mailing Address	21-21 BROADWAY	
		LONG ISLAND CITY NY 1110	06 _
		CITY A STATE A ZIP	CODE A

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Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.				
Name of Bank, Depository,	etc.			[ADDITIONAL]
Mailing Address				
				-
		CITY 🛆	STATE △	ZIP CODE 🛕
Name of Any Connected	Organization or Affilia	ted Committee	1	[ADDITIONAL]
				·
SHEET METAL WORK	ERS' INTERNATION	NAL ASSOCIATION POLITICAL	ACTION LEAGUE	
	⊥ 1750 New Yor	k Avenue NW		
Mailing Address				
	Washington		DC	20006
		CITY	STATE A	ZIP CODE A
		O	OTATE	2.11 00022 🙇
Relationship AFF	ILIATED			
Type of Connected Organiz	zation:			
			X Labor Or	
Corporation		Corporation w/o Capital Stock	Labor Org	ganization
Membership Orga	nization	Trade Association	Cooperat	ive

Designated Agent		[ADDITIONAL]
Full Name Mailing Address		
Title or Position ♥	CITY A	STATE A ZIP CODE A
		elephone number = =